

ONEIDA COUNTY PERMIT APPLICATION

To receive a permit you must complete this form. Send the completed application and fee(s) in the form of check or money order payable to the Oneida County Health Department. Incomplete information may delay the processing of your application. For the complete mailing address see reverse side this form. Type or Print Only.

Application is for: ☐ New Establishment ☐ Change in Ownership ☐ Existing

Establishment Name		
Establishment Street Address, City, State & Zip Code		Establishment Telephone
Legal Licensee (such as name of sole proprietor or partnership, or LLC, LLP, Inc.)		
Licensee Street Address, City, State & Zip Code		Legal Licensee Telephone
Name of Agent for the Corporation/Operator (if applicable)		Intended Date of Opening for Business
Name of Former Business	Name of Former Operator	ID No.

Check appropriate category for each of the following sections.

RESTAURANTS

☐ Prepackaged off-premise \$75.00 Permit fee, Preinspection fee \$125.00 for new establishments and change of owner
☐ Full-service – Simple \$148.00 Permit fee, Preinspection fee \$150.00 for new establishments and change of owner
☐ Full-service – Moderate* \$210.00 Permit fee, Preinspection fee \$250.00 for new establishments and change of owner
☐ Full-service – Complex* \$290.00 Permit fee, Preinspection fee \$350.00 for new establishments and change of owner
☐ Additional Food Prep Area \$80.00 (within establishment)

*To be determined by Inspector at time of preinspection, if applicable.
 *\$100.00 reinspection fee is assessed to restaurants in need of a second reinspection within one year

State of Wisconsin Restaurant Manager Certification ID No.: _____ Expiration Date: _____

LODGING

<input type="checkbox"/> Tourist Rooming House (1-4 rooms) (Cabin, Cottage, etc.) \$85.00 Permit fee, Preinspection fee \$125.00 for new establishments and change of owner <input type="checkbox"/> Hotel/Motel/Resort (5-30 rooms) \$124.00 Permit fee, Preinspection fee \$125.00 for new establishments and change of owner <input type="checkbox"/> Hotel/Motel/Resort (31-99 rooms) \$190.00 Permit fee, Preinspection fee \$200.00 for new establishments and change of owner <input type="checkbox"/> Hotel/Motel/Resort (100-199 rooms) \$250.00 Permit fee, Preinspection fee \$275.00 for new establishments and change of owner <input type="checkbox"/> Hotel/Motel/Resort (200 + rooms) \$300.00 Permit fee, Preinspection fee \$350.00 for new establishments and change of owner <input type="checkbox"/> Bed & Breakfast (8 or less rooms) \$65.00 Permit fee, Preinspection fee \$125.00 for new establishments and change of owner	No. of Sleeping Rooms _____ _____ _____ _____ _____
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Hotel/Motel operator, please advise as to how you want to be classified: ☐ Hotel ☐ Motel
 If a lodging facility, is there food service for tourists, transients or guests on your premises? ☐ Yes ☐ No

CAMPGROUND

	No. of Sites	
<input type="checkbox"/> Campground (1-25 sites) \$106.00	_____	_____
<input type="checkbox"/> Campground (26-50 sites) \$147.00	_____	_____
<input type="checkbox"/> Campground (51-100 sites) \$175.00	_____	_____
<input type="checkbox"/> Campground (101-199 sites) \$195.00	_____	_____
<input type="checkbox"/> Campground (200 + sites) \$225.00	_____	_____

If a campground facility, do you have food service for patrons? ☐ Yes ☐ No
 Layout and plan must be submitted with application for new and remodeled camps.

RECREATIONAL & EDUCATIONAL CAMP
 \$200.00 Total capacity of camp (in number of persons accommodated at one time) _____

POOLS

\$150.00 per pool

Type of pool (indicate the number of each type of pool on property in check box)

- | | | | |
|---|-------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Activity | <input type="checkbox"/> Plunge | <input type="checkbox"/> Vanishing Edge | <input type="checkbox"/> Wave |
| <input type="checkbox"/> Cold Soak (below 72°F) | <input type="checkbox"/> Splash Pad | <input type="checkbox"/> Vortex | <input type="checkbox"/> Whirlpool |
| <input type="checkbox"/> Combination | <input type="checkbox"/> Swimming | <input type="checkbox"/> Wading | |
| <input type="checkbox"/> Leisure River | <input type="checkbox"/> Therapy | <input type="checkbox"/> Water Attraction | |

*Note: Department of Commerce plan approval required for new / altered / modified pools.***TATTOO & BODY-PIERCING ESTABLISHMENTS**

- | | |
|---|---|
| <input type="checkbox"/> Tattoo Establishments | \$100.00 Permit fee, Preinspection fee \$75.00 for new establishments and change of owner |
| <input type="checkbox"/> Body-Piercing Establishments | \$100.00 Permit fee, Preinspection fee \$75.00 for new establishments and change of owner |
| <input type="checkbox"/> Combined Tattoo/Body-Piercing Establishments | \$100.00 Permit fee, Preinspection fee \$75.00 for new establishments and change of owner |
| <input type="checkbox"/> *Temporary Tattoo Establishments | \$150.00 Permit fee, Preinspection fee \$75.00 for new establishments and change of owner |
| <input type="checkbox"/> *Temporary Body-Piercing Establishments | \$100.00 Permit fee |
| <input type="checkbox"/> Combined Temporary Tattoo/Body-Piercing Establishments | \$100.00 Permit fee |

** Temporary permits are valid no more than 7 days per event.*

State of Wisconsin Tattooist/Body-Piercer ID No.: _____

Expiration Date: _____

Check the appropriate season(s) your business is in operation.

- ☐ Year Round
☐ Winter
☐ Summer

TOTAL AMOUNT ENCLOSED: \$ _____

APPLICANT SIGNATURE

Date Signed

\$75.00 late fee applies to all types of establishments listed on this application.

A permit shall not be issued to a new establishment without a preinspection and payment of applicable fees.
Establishments must also be properly zoned for activity.

Please mail completed application to:

Oneida County Health Department
ATTN: Sanitarian Program
1 Courthouse Square, P.O. Box 400
Rhineland, WI 54501